Application No. Filling Date Examiner Art Unit 10/511,064-Conf. #8561 April 20, 2005 J. S. Lundgren 1639 pplicant(s): Scott Alan Jelinsky et al. vention: ESTROGEN RECEPTOR ALPHA REGULATED GENE EXPRESSION RELATED ASSAYS AND THERAPEUTICS TO THE COMMISSIONER FOR PATENTS Transmitted herewith is an amendment in the above-identified application. The fee has been calculated and is transmitted as shown below. Claims Number Number Paid Number Paid Previousity Number Paid Paid Previousity Number Paid Previousity Number Paid	AMENDMENT TRANSMITTAL LETTER						Docket No. 00630/0204187-US0		
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Independent 6 - 6 = 0 x 200.00 0.00 Multiple Dependent Claims (check if applicable) Other fee (please specify): TOTAL ADDITIONAL FEE FOR THIS AMENDMENT: 0.00 X Large Entity Small Entity No additional fee is required for this amendment. Please charge Deposit Account No. in the amount of \$ Aduplicate copy of this sheet is enclosed. A check in the amount of \$ to cover the filing fee is enclosed. Payment by credit card. Form PTO-2038 is attached. X The Director is hereby authorized to charge and credit Deposit Account No. 04-0100 as described below. A duplicate copy of this sheet is enclosed. X Credit any overpayment. X Charge any additional filing or application processing fees required under 37 CFR 1.16 and 1.17. Amy G. Kläfin Dated: January 29, 2007 ARM C. Kläfin ARM C. Kläfin DARBY & DARBY P.C. P.O. Box \$257 New York, New York 10150-5257	Remaining Number Number After Previously Extra Claims								
Claims		89	- 120 =	0	х	50.00		0.00	
Other fee (please specify): TOTAL ADDITIONAL FEE FOR THIS AMENDMENT: \[\text{No additional fee is required for this amendment.} \] \[\text{No additional fee is required for this amendment.} \] \[\text{Please charge Deposit Account No.} \] \[\text{In the amount of \$ } \] \[\text{In the amount of \$ } \] \[\text{In cover the filing fee is enclosed.} \] \[\text{Payment by credit card.} \] \[\text{Form PTO-2038 is attached.} \] \[\text{Y The Director is hereby authorized to charge and credit Deposit Account No.} \] \[\text{04-0100} \] \[\text{as described below.} \] \[\text{A duplicate copy of this sheet is enclosed.} \] \[\text{X Credit any overpayment.} \] \[\text{X Credit any overpayment.} \] \[\text{X Charge any additional filing or application processing fees required under 37 CFR 1.16 and 1.17.} \] \[\text{Army C. Klaffin} \] \[\text{Army C. Klaffin Reg. No.:} \] \[48,155 \] DARBY & DARBY P.C. P.O. Box \$257 \] New York, New York 10150-5257		6	- 6 =	0	x	200.00		0.00	
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